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ABSTRACT

The booklet is intended to serve as a guide for parents who think that their children may have learning and school problems. Initial sections explain the nature of learning disabilities, describe common signs (such as problems with physical activities and with tasks that require a specific order or sequence), and briefly discuss the lack of clear evidence about causes for learning disabilities. Suggestions are made for parental action at the first serious suspicion of learning disabilities. The effectiveness of dietary, drug, and behavioral treatments are briefly analyzed. Parents are urged to coordinate their child's educational program and to complement that program by a home approach that features specific directions, help with organization, learning how to learn, repetition, cooperation with the school, clear rules and consequences, patience and firmness with impulsive or negative behavior, emphasis on success, and a supportive parent-child relationship. (CL)

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# A PARENT'S GUIDE TO

## Learning and School Problems

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U.S. DEPARTMENT OF EDUCATION
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BOYS TOWN

The Boys Town National Institute for Communication Disorders in Children, a research hospital, diagnoses and treats children from infancy through adolescence who have hearing, speech, and language problems; learning disabilities; and craniofacial disorders. For more information about its programs, write to BTNI Publications, 555 N. 30th Street, Omaha, NE 68131.

Additional copies of this booklet may be obtained from the Communications & Public Service Division, Boys Town, NE 68010.

# Does My Child Have a Learning Problem?

*"He's so disorganized. He loses everything, and he doesn't know whether it's today, yesterday, or tomorrow."*

*"I can't figure him out. One minute he'll talk about life on Mars, and the next minute he doesn't know the days of the week."*

*"She turns things around. She says 'basghetti' for 'spaghetti,' and she reads 'on' for 'no,' '13' for '31,' or 'p' for 'q.'"*

Many parents make statements like these about their children, especially during the first few years of school. For most children, such characteristics are temporary and just part of the complex task of growing up. For others, though, they represent more persistent learning and school problems that often frustrate child, parent, and teacher.

This booklet is a guide for parents who think their child may have special learning and school problems. It describes what these problems are, how you can look for them in your child, how to get a comprehensive diagnosis, what treatments seem to work or not work, and what you can do at home to help such a child.

# What Are Learning Disabilities?

There is no one learning disability—there are many different learning disabilities. So there is no single, specific definition that covers all of these problems. Usually, though, a child with learning disabilities has special difficulty with one or more specific learning or school tasks—much more difficulty than would be expected on the basis of the child's general intelligence.

For example, the child may not be able to sit still and attend to lessons very long; have particular difficulty learning to read, write, or calculate; or show special problems understanding, remembering, and speaking language.

In most cases the child is quite normal in intelligence. These children are *not* mentally retarded—some are very bright. In most cases, scientists and learning specialists do not know precisely what is wrong, only that the child has unusual difficulty with certain, sometimes very specific, learning tasks.

# What Should I Look For?

Typically, a problem is first noticed when a child begins to read, write, and calculate in school, although some disabilities may be detected earlier. Usually teachers discover it when they see the child trying to learn basic school skills. But teachers have so many children, they may not recognize a specific problem in your child as soon as you do Regardless of who first senses a problem, both your observations at home and the teacher's at school will be useful.

**Cautions.** When you look for signs of a learning problem, you must realize that no single symptom characterizes every child with learning disabilities and no child with learning disabilities has all the symptoms. Also, most children who do *not* have learning disabilities also show some of these traits but not as many and not so persistently. So just because your child shows a few of these signs does not mean he or she has a problem unless several signs appear and continue for many months.

**Signs.** Children with learning disabilities have a variety of **language, reading, and math problems,** especially with tasks that require a specific order or sequence.

- They may be slow to develop the ability to speak, understand stories, or follow directions. They may say words in the wrong sequence—"please up hurry."
- They may start or stop talking in midsentence, be unable to vocalize a word until someone says it, and pronounce certain words in odd ways (e.g., "hopsitals," "aminals," "emenies").
- They may persistently read "on" for "no," "14" for "41," "p" for "d," or "q" for "b;" have difficulty associating the letter "c," for example, with its sound; or be unable to distinguish between words like "chop" and "shop."
- They may be able to add and subtract but not multiply and divide, or they can calculate in their heads but not on paper.
- They may also have poor eye-hand coordination and be rather messy writers.

They often seem **lost in time and space.**

- They may not know what time, day, year, or season it is.
- They sometimes have particular difficulty understanding the meaning of yesterday, today, and tomorrow.
- They sometimes cannot remember what they saw or were told an hour or two ago.
- They may have special trouble understanding concepts like up/down, left/right, above/below, top/bottom, in/out, and under/over. For example, when you ask such a child to stand in front of the table, he or she may stand behind it.

They may have **problems with physical activities.**

- They may be awkward and clumsy, frequently off balance, and have trouble learning to tie their shoes.
- They may break things and be accident prone.
- They may be hyperactive and fidgety or underactive and appear tired most of the time.

- They may be unable to sit still or concentrate, although sometimes this occurs at school but not when playing a favorite game at home.

They are often **disorganized.**

- They may not be able to remember where their belongings are located.
- Their rooms and homework may be messy and disorganized.
- They may have a hard time following directions or making decisions.
- They may have difficulty planning an activity or carrying out a plan.

They may be **socially impulsive.**

- Sometimes they can be free spirited and bring a freshness and enthusiasm to life. At other times, they want *what* they want *when* they want it.
- They can become upset instantly and over what seems to be "nothing."
- They may lack self-confidence and self-esteem and refuse to try certain activities, saying "I can't," "I don't want to," or "I'm not good at that."
- They may have difficulty making friends.
- They may be socially immature, risk punishment to gain attention, and constantly interrupt.

## What Causes Learning Disabilities?

No one has really determined what causes learning disabilities, but it is likely that many factors—not just one or two—produce these different problems.

A variety of circumstances before, during, and after birth can contribute, but most of the time the specific cause for a particular child's problem is not known. So nothing is gained by trying to place the blame on someone or on some event or circumstance. Certainly there is no need to feel guilty about it.

We do know that two-thirds of such children are first recognized between 8 and 11 years of age; there are four boys for every girl involved; these problems tend to run in families; and many of these young people also have difficulty adjusting, perhaps as a result of their disabilities, to friends, themselves, parents, and teachers.

# What If I Suspect a Problem?

**Get a diagnosis as soon as you seriously suspect that your child has learning disabilities.** Without an early diagnosis, needed help might be denied and your child will continue to experience failure. An early diagnosis will help you, too, because otherwise you may attribute your child's failures to rebelliousness, stupidity, or laziness rather than to a specific disability.

**Seek a comprehensive evaluation conducted by several specialists.** Start by discussing your concerns with school personnel. If you feel a formal evaluation is needed, current law states that the public school must provide one without charge. Ideally, the evaluation will take place at a diagnostic center or clinic specializing in learning disabilities that employs educational, psychological, and medical professionals who will test and evaluate your child from many different points of view. The main goal is to determine which specific learning skills your child can accomplish and which ones he or she cannot perform easily. Your child should be evaluated individually with several different tests, and you should expect a copy of the results and interpretation plus a thorough explanation.

Of course, you may pay for a private evaluation. Consult school officials, pediatrics and education departments of local universities, your personal physician, the special education officer of your state or local department of education, or the nearest chapter of the Association for Children with Learning Disabilities for references to diagnostic services.

A good evaluation should check for obvious physical or medical problems, such as visual and hearing problems, but elaborate neurological exams (brain scans, electroencephalographs) are not necessary, at least at first. When no physical problem is found, concentrate on educational and psychological evaluations, preferably conducted by two or more professionals with different backgrounds who specialize in learning disabilities.

**Don't resist testing.** Testing in general has had a lot of bad press lately, and everyone has some concern that testing will reveal something no one really wants to hear. But comprehensive educational, language, and psychological testing is necessary to decide if a problem exists, the nature of the specific problem, and how best to help you and your child.

## What Kind of Treatment Is Recommended?

Each child and each problem is different. Many specialists suggest that a comprehensive program created jointly by educational, psychological, and sometimes medical specialists and emphasizing individual tutoring is often best. The public schools are required to draw up with you an Individualized Educational Plan (IEP) that should be reviewed annually. Generally, a child with learning disabilities either remains in a regular ("mainstream") classroom and receives individualized help at a "resource room" or is placed in a classroom with other children who need special help. In either case, you can also arrange for private tutoring at your own expense, but this should be coordinated with the school program.

Finally, it often helps for you to take some of the initiative for getting a comprehensive diagnosis, establishing and reviewing a treatment program, and obtaining the services to which you are entitled. Most professionals sincerely want to help, but it does not hurt for you to coordinate services for your child.

## What about Other Treatments?

In the last few years, a variety of theories and treatments have been proposed, some with a great deal of publicity and controversy. What is the scientific evidence on the effectiveness of these approaches?

**Diet.** Some specialists have suggested that diet, primarily certain food additives, causes hyperactivity. Research indicates that a few children are sensitive to certain foods and additives and do improve when placed on special diets. Most children, however, do not benefit from this treatment.

**Drugs.** Stimulants, principally Ritalin, are effective in improving attention among hyperactive children, but in the long run they alone do not produce a "cure." Further, they are less useful for preschool than for school-age children; they can have side-effects (inability to sleep, reduced appetite, and weight loss); and one level of dosage may reduce some symptoms while another level of dosage may reduce other symptoms.

It is important to understand that while diet and drugs may help a few hyperactive children, they are *not* effective treatments for academic problems, such as the inability to read, write, calculate, and so forth.

**Behavioral treatments.** You should be skeptical of any approach that comes packaged, ready to apply, without regard to the specific nature of your individual child's problem. In particular, exercises that promote eye or bodily coordination, three-dimensional readers that present material in sequence, speed reading, and teaching machine programs have not been shown conclusively to be effective.

# What Can I Do at Home?

In addition to a coordinated, specialized educational program, you can help your child at home by following these guidelines:

**Make directions to your child specific and simple.**

- Be brief, but precise. Make one simple request at a time, and do so in one or two sentences.
- Limit your child to short projects and activities—only a few minutes long—so he or she can maintain attention throughout the activity.
- Reward persistence, even small amounts, with encouragement and praise.
- For complicated tasks involving a series of steps, teach the last step first. Only after it has been mastered should you add the next-to-the-last step to the sequence, and so on. For example, to teach bed-making, start by having your child put on the bedspread—the last step. Reward that accomplishment. After a few successes, ask that the pillow be placed *and* the bedspread put on, and then reward. Continue to add one more step at a time every few days until your child can make the whole bed.

**Help your child become organized.**

- Have a place for everything. Provide shelves (instead of drawers) in the child's room with labels or pictures indicating where toys and objects belong.
- Establish routines, such as at bedtime and when getting ready for school in the morning. Try to stay with the routine, but when it must be altered, take time to explain the change and "walk your child through" the new procedure.
- Provide work charts or checklists as reminders for complicated or multiple activities, because your child may have difficulty remembering many items or sequences.

**Help your child learn how to learn.**

- For young children, label parts of the body (put a small mark on the right hand), and provide reminders ("Where is your pencil? You are going to need it in a few minutes.").
- Teach simple study skills. Have one place that your child uses only for study and teach the study routine: read, recite, review, answer questions, review again.
- Try different ways to help your child learn. If your child does not learn to set the table after you *tell* how to do it, *show* how to do it next time. Use objects, not just numbers, to teach number concepts.

**Repeat learning experiences.**

- Many children do not seem to remember from hour to hour or day to day. You think they have learned to spell, tie their shoes, add, or write their names, but an hour later they seem to have forgotten it completely. Repeat your directions the same way or try another approach.
- Be patient.

**Cooperate with the school.**

- Request frequent conferences with your child's teachers.
- Allow your child's teachers to develop appropriate teaching methods. Ask how they are teaching different subjects, how they discipline, and how you can carry out the same approaches at home. For example, sometimes reading or mathematics is taught by having children practice in unusual ways. These procedures may appear funny to you, but encourage these approaches at home if the teachers are using them.

**Keep your goals attainable.**

- Make sure your child is capable of achieving the goals you set by starting with small goals. Remembering to bring books and pencils to school is a start, finishing homework or special practice sheets may be next, and so on.
- Enjoy together each of your child's achievements for a few days before asking for better performance.

**Have clear rules and consequences.**

- Establish clear rules for social behavior, even write them down.
- Decide in advance what will happen when a rule is obeyed as well as when a rule is broken. For example, homework must be completed, checked, and corrected before TV, or yelling and screaming gets 15 minutes in the child's room.
- Think about the rules and consequences carefully and discuss them with your child when establishing them. But once they are finalized, follow through consistently with the consequences.
- Avoid nagging, reminding, negotiating, or making exceptions until you are ready to revise the rules.

**Be patient but firm with impulsive or negative behavior.**

- When you must correct or discipline your child, be sure also to demonstrate what behavior is expected.
- Have your child imitate and practice the correct behavior, and show how pleased you are when he or she does it.

**Highlight successes.**

- Reward with enthusiasm, praise, privileges, or special favors any genuine success however trivial it may seem. It will promote self-esteem and confidence.
- Encourage activities or skills that your child does well, even if they are not school related. Any success helps.
- Emphasize the positive; ignore failures.

**Build your relationship.**

- Regardless of how things are going, plan to spend some time as often as possible doing things together that your child enjoys.
- Let your child pick the activity and set the rules, then you follow his or her lead.

## What Is My Child's Future?

Most of us have certain disabilities—we can't sing, we get confused when using a city map, or we lack the physical coordination for gymnastics or ballet. These are not problems for us though, because we can avoid these activities or find another way to achieve. But schools teach all children reading, writing, and calculating, and they do so in more or less the same way. Also, while few children are asked to sing a solo in front of the class, every child must read or calculate alone in front of the class. So disabilities in reading, writing, and calculating are a bigger part of a child's life than other disabilities.

Once out of grammar school, however, society offers more alternatives for educational and occupational success. Moreover, individually designed educational programs can produce marked improvement, although the disability may not disappear with age as once thought. Most people learn to cope successfully, and many young people with learning disabilities perform quite well, even becoming college professors, lawyers, and doctors.

All such children need special understanding, firm but caring discipline, special teaching approaches, successes, and love.

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